



2-24-06 Uses TFW \$

Express Mail No. EL 989611990 US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: SINGH et al.	Docket No: 375462-012US
Serial No.: 10/631,029	Confirmation No.: 3056
Filed: July 29, 2003	Group Art Unit: 1614
For: METHODS FOR TREATING OR PREVENTING DISEASES WITH 2,4- PYRIMIDINEDIAMINE COMPOUNDS	Examiner: K. WEDDINGTON

Mail Stop Box Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

I. ENCLOSURES

Transmitted herewith is the following documents for the above-referenced application:

☒ 23 Page Amendment and Response Under 37 CFR § 1.111.

II. EXTENSION OF TIME

Applicant petitions for an extension of time under 37 CFR § 1.136(a) for the total number of months checked below:

	Extension (months)	Fee for other than small entity	Fee for small entity
<input type="checkbox"/>	one month	\$ 120.00	\$ 60.00
<input type="checkbox"/>	two months	\$ 450.00	\$ 225.00
<input checked="" type="checkbox"/>	three months	\$1,020.00	\$ 510.00
<input type="checkbox"/>	four months	\$1,590.00	\$ 795.00
<input type="checkbox"/>	fifth month	\$2,160.00	\$1,080.00

Extension Fee \$510.00

☒ If an extension under 37 CFR § 1.136(a) for additional time is required, please consider this a petition therefor.

III. FEE FOR CLAIMS

☒ The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee		Rate	Addit. Fee
Total *	60	Minus *0*	50	10	x25=	\$250	x50=	\$0
Indep. *	1	Minus *0*	1	0	x100=	\$0	x200=	\$0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+180=	\$0		x360=	\$0
				TOTAL ADDIT. FEE	\$250	OR	TOTAL ADDIT. FEE	\$0

- ☐ No additional fee for claims required.
☒ Total additional fee for claims required.

IV. CHANGE OF ATTORNEY DOCKET NO.

☒ The attorney docket number for this application was formerly entered as 28575/US/US. It has since been changed to docket number **375462-012US (355218)**. Please use this new docket number in reference to this application for all future communications.

V. FEE PAYMENT

- ☐ Attached is a check in the sum of \$_____ for additional claims fee.
☒ Charge Account No. 50-2778 the sum of \$250.00 for additional claims, the sum of \$510.00 for Extension of Time - Three Month, and the sum of \$180.00 for Information Disclosure Statement (**Order No. 375462-012US (355218)**).

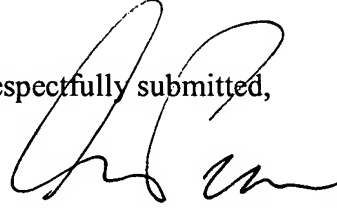
VI. FEE DEFICIENCY

- ☒ In the event that the indicated amount is less than or greater than the required fee, the Commissioner is authorized to charge any required additional fees, or credit any overpayment to Deposit Account 50-2778 (**Order No. 375462-012US (355218)**).

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☒ Attached is a postcard for date-stamped return as confirmation of receipt of these materials.

Respectfully submitted,



Date: February 22, 2006

Ann M. Caviani Pease
Reg. No. 42,067

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